Attach check or money order

DO NOT SEND CASH

APPLICATION FOR CONVERSION FROM AN INITIAL TO A STANDARD LICENSE

Board of Educational	Examiners
Use Only	

Revised 10/07 Form #1

INSTRUCTIONS: (Incomplete applications may be returned.)

- 1. The application must include a completed application, \$85 nonrefundable application fee, and applicable late fees.
- 2. Send all materials and check or money order (made payable to the Board of Educational Examiners) to the **Board of Educational Examiners**, **Licensure**, **Grimes State Office Building**, **400 E. 14**th **St.**, **Des Moines**, **IA 50319-0147**.
- 3. LATE RENEWAL FEE. An additional fee of \$25 per calendar month, not to exceed \$150, shall be imposed if a renewal application is submitted after the expiration date. The board will waive the late fee for the following: (a) not currently practicing as an educator in lowa, (b) obtaining a Substitute License.
- 4. Please allow four weeks for processing.

FYI – If you have taken any college credit or AEA licensure renewal credit before the issue date of the Standard License, these hours cannot be used to renew the Standard License.

Applicant's Folder #	Social Security #	Date of Birth Month Day Year	☐ Male ☐ Female
Last Name	First Name	Middle Name	Maiden Name
Address	City	State	Zip Code
Home Phone	Work Phone	Email Address	
()	()		

Background Information:

For any "Yes" response, attach a written explanation on 8 1/2" x 11" paper. Be sure to include the date of the violation. DO NOT explain on this application form. *If you have reported a "Yes" response on a previous application, check "PR" (previously reported) instead of "Yes" on this application, if no further conviction(s) has occurred.
a. Yes□ No□ PR□ Have you ever been convicted of a felony?
b. Yes No PR Have you ever been convicted of a crime other than parking or speeding violations?
(NOTE: Include all deferred judgments.)
c. Yes No Do you currently have any criminal charges pending against you?
d. Yes No PR Have you ever had a founded report of child abuse made against you?
e. Yes No PR Have you ever had an educational license revoked or suspended?
f. Yes No Are you a United States citizen? If you answered "No," check if you are:
a qualified alien (as defined in 8 U.S.C.A. § 1641). If so, please provide appropriate
documentation.
an alien who is paroled into the United States under 8 U.S.C.A. § 1182(d)(5) for less
than one year. If so, please provide appropriate documentation.
a foreign national not physically present in the United States.
☐ other – Please provide a detailed explanation on a separate 8 ½ x 11 sheet of paper

Statement of Fraud:			
An application will be considered fraudulent, and may be denied, if it contains any false representation or omission of material fact, or if false records are submitted in support of the application.			
I certify correct.		e state of lowa that the preceding information is true and	
Signatu	ure of Applicant	Date	
		Form #2	
SECTION	N II: To be completed by your lowa public school Administrator.		
		n program, has 2 full years of teaching experience, meets or commended for a Standard License. (Superintendent's	
	Teacher is being recommended for a third-year con which standard(s) were not met.	ditional license before license decision is made. Please mark	
	IMPLEMENTATION OF THE SCHOO	E ACADEMIC PERFORMANCE AND SUPPORT FOR AND L DISTRICT'S STUDENT ACHIEVEMENT GOALS. ONTENT KNOWLEDGE APPROPRIATE TO THE TEACHING	
blic School	☐ 3. DEMONSTRATES COMPETENCE IN PL	ANNING AND PREPARING FOR INSTRUCTION. RUCTION THAT MEETS THE MULTIPLE LEARNING NEEDS	
Sch	 □ 5. USES A VARIETY OF METHODS TO MO □ 6. DEMONSTRATES COMPETENCE IN CL □ 7. ENGAGES IN PROFESSIONAL GROWT 	ASSROOM MANAGEMENT.	
ပ	8. FULFILLS PROFESSIONAL RESPONSI	BILITIES ESTABLISHED BY THE SCHOOL DISTRICT.	
		(Superintendent's signature required. It is the responsibility of cational Examiners the teacher's failure to meet the Iowa	
lowa Pu		red to convert this license. n one school district, each additional school district must Iministrator should use official school letterhead to document	
	##_		
	Evaluator's Signature and Folder Number	Date	
	##	District quired if teacher is recommended for Standard License)	
	Superintendent's Signature and Folder Number (Not rec	quirea ii teacner is recommenaea tor Standard License)	

SECTION	II: To be comple	eted by your nonpul	blic or out-of-state school A	dministrator.			
loc	following da	I hereby verify that the applicant in Form #1 served successfully as a teacher in this school district between the following dates. (Three years of experience in an Iowa nonpublic school or out-of-state school are necessary to convert the initial license to a standard license.					
cho	month	day	year year	month	day	year	
te S	School Dist	trict/AEA		City		Sta	te
Stat	District(s) to	aught:					
Out-of-	List specific subjects taught:						
or (Signature o	of Administrator		Date	e		<u>-</u>
Nonpublic or Out-of-State Schoo	(If to	trict must verif	Administrator ience is completed in that to document the da	n more than one sch district. The distric	nool district, e t's administra	ntor should use o	fficial